PLACE OF BIRTH	and the second of the second o
1. County of ARIZO	NA STATE BOARD OF HEALTH
District of BUREAU OF VITAL STATISTICS	
	TIFICATE OF BIRTH State Index No. 145
or Class	County Registrar No. 7
City of No.	Local Registrar No
2. Full name of child Georgia Lorrans G	hospital or institution, give its NAME instead of street and number)
3. Sex of Child	supplemental report, as directed
Teurle births.	birth 12 Pate of birth Mul 13-24
8. FATHER	Month day year
Full name Walter Harold Glenn	Full maiden name alice Genella Dawson
9. Residence (Usual place of abode)	15. Residence (Usual place of abode) Globe
If nonresident, give place and state augona	If nonresident, give place and wate army
10. Color or race	16. Color or race
Mule 11. Age at last birthday 2/ (Years	white
12. Birthplace (city or place)	18. Birthplace (city or place) Bellon
(State or country) Mussoure	(State or country)
13. Occupation Nature of industry	19. Occupation
Stage Di	Nature of industry 11
20. Number of children of the mother (a) Born slive and	Housewife.
certified and including this child.) (c) Stillborn	
CERTIFICATE OF ATTENDING	PHYSICIAN OR MIDWIES
134 A	
midwife, then the father, householder, etc., Signature	avadams
is one that neither breathes nor shows other child evidences of life after birth. Address	(Physician or midwis)
a supplemental report Month, day, year. Filed	W. 15 KAY BRICA
Tontal, day, year.	A Clara Position
Begistrar. Filed	
775-613-145	County Registrar.